

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

TED YOHO FOR CONGRESS

ADDRESS (number and street)

5745 SW 75TH STREET, #283



Check if different than previously reported. (ACC)

GAINESVILLE

FL

32608

2. FEC IDENTIFICATION NUMBER ▼

C C00494583

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

FL

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

01 / 01 / 2014

through

M M / D D / Y Y Y Y

03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer LAURA JACKSON

Signature of Treasurer LAURA JACKSON

[Electronically Filed]

Date

M M / D D / Y Y Y Y

04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

TED YOHO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	184509.83	473030.17
(b) Total Contribution Refunds (from Line 20(d))	0.00	400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	184509.83	472630.17
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	70998.83	218253.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1646.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	70998.83	216607.07
8. Cash on Hand at Close of Reporting Period (from Line 27).....	360451.22	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 122

Write or Type Committee Name

TED YOHO FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	4

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

108750.44

260593.24

(ii) Unitemized.....

36859.39

47059.39

(iii) TOTAL of contributions from individuals ▶

145609.83

307652.63

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

38900.00

165377.54

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

184509.83

473030.17

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

16042.76

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

1646.45

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

184509.83

490719.38

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 122

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	70998.83	218253.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	37303.21
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	37303.21
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	400.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	400.00
21. OTHER DISBURSEMENTS	6650.00	24545.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	77648.83	280501.73

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	253590.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	184509.83
25. SUBTOTAL (add Line 23 and Line 24).....	438100.05
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	77648.83
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	360451.22

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 5 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MR. MARCUS ADOLFSSON		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		24		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		24		2014									
Mailing Address 1478 SW 90TH ST.		Transaction ID : SA11AI.11534											
City GAINESVILLE	State FL	Zip Code 32607	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2600.00</td> </tr> </table>						2600.00				
					2600.00								
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2600.00</td> </tr> </table>							2600.00				
					2600.00								
Name of Employer MOBILE NATIONS	Occupation CEO												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2600.00</td> </tr> </table>								2600.00				
					2600.00								

B. Full Name (Last, First, Middle Initial) MRS. CASEY ADOLFSSON		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>03</td> <td></td> <td>24</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	03		24		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
03		24		2014									
Mailing Address 1478 SW 90TH ST.		Transaction ID : SA11AI.11535											
City GAINESVILLE	State FL	Zip Code 32607	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2600.00</td> </tr> </table>						2600.00				
					2600.00								
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>2600.00</td> </tr> </table>							2600.00				
					2600.00								
Name of Employer SELF EMPLOYED	Occupation ARTHUR												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>2600.00</td> </tr> </table>								2600.00				
					2600.00								

C. Full Name (Last, First, Middle Initial) LISA H ALBERTSON		Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>10</td> <td></td> <td>2014</td> </tr> </table>		M M M	/	D D D	/	Y Y Y Y Y Y	02		10		2014
M M M	/	D D D	/	Y Y Y Y Y Y									
02		10		2014									
Mailing Address POST OFFICE BOX 1000		Transaction ID : SA11AI.10804											
City ALACHUA	State FL	Zip Code 32616	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>						500.00				
					500.00								
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="5"></td> <td>500.00</td> </tr> </table>							500.00				
					500.00								
Name of Employer PHOENIX COMMERCIAL BANK	Occupation OWNER												
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td colspan="5"></td> <td>1000.00</td> </tr> </table>								1000.00				
					1000.00								

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td colspan="5"></td> <td>5700.00</td> </tr> </table>						5700.00
					5700.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="5"></td> <td></td> </tr> </table>						

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 122
 (check only one)
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) BARRY ALLRED			Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 2592 ADMIRALS WALK DRIVE SOUTH			Transaction ID : SA11Al.10869	
City ORANGE PARK	State FL	Zip Code 32073	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Occupation CONSTRUCTION EXECUTIVE		
Name of Employer ELKINS CONSTRUCTORS, INC		Election Cycle-to-Date 1000.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) SHERRY AVERY			Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 3375 COUNTY ROAD 220			Transaction ID : SA11Al.10866	
City MIDDLEBURG	State FL	Zip Code 32068	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Occupation RETIRED		
Name of Employer NONE		Election Cycle-to-Date 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) T. RICHARD BARBER JR.			Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 2940 WEST SILVER SPRINGS BLVD			Transaction ID : SA11Al.11036	
City OCALA	State FL	Zip Code 34475	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		Occupation FARMER		
Name of Employer SELF EMPLOYED		Election Cycle-to-Date 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

SUBTOTAL of Receipts This Page (optional).....			1000.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 7 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

HENRY BECKWITH**A.**

Mailing Address 3277 HIGHWAY 17 SOUTH

City

ORANGE PARK

State

FL

Zip Code

32073

FEC ID number of contributing
federal political committee.

C

Name of Employer

W.W. GAY MECHANICAL CONTRACTOR

Occupation

SENIOR VP

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : SA11Al.11795

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MRS. KATHLEEN BENTON**B.**

Mailing Address 3641 NW 23RD PL.

City

GAINESVILLE

State

FL

Zip Code

32605

FEC ID number of contributing
federal political committee.

C

Name of Employer

BENTON PEDIATRICS

Occupation

RN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11Al.10805

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

MRS. KATHLEEN BENTON**C.**

Mailing Address 3641 NW 23RD PL.

City

GAINESVILLE

State

FL

Zip Code

32605

FEC ID number of contributing
federal political committee.

C

Name of Employer

BENTON PEDIATRICS

Occupation

RN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SA11Al.11524

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

900.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) WAYNE BOLLA		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 925 LONGRIDGE CT.		Transaction ID : SA11AI.10878
City ORANGE PARK	State FL	Zip Code 32065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MS. BARBARA BRITT		Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 19505 NW 184TH TERRACE		Transaction ID : SA11AI.11272
City HIGH SPRINGS	State FL	Zip Code 32643
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) DENISE W BROOM		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 14818 NW 45TH PL.		Transaction ID : SA11AI.11489
City NEWBERRY	State FL	Zip Code 32669
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

SUBTOTAL of Receipts This Page (optional)	2850.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) TIM G BROOM		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 14818 NW 45TH PL.		Transaction ID : SA11Al.11488	
City NEWBERRY	State FL	Zip Code 32689	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3100.00		
B. Full Name (Last, First, Middle Initial) TIM G BROOM		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 14818 NW 45TH PL.		Transaction ID : SA11Al.11490	
City NEWBERRY	State FL	Zip Code 32689	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3100.00		
C. Full Name (Last, First, Middle Initial) SUSAN BULLOCK		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014	
Mailing Address 18050 NE 55TH ST.		Transaction ID : SA11Al.11464	
City WILLISTON	State FL	Zip Code 32696	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....		3600.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 10 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

STEPHEN CADE

A.

Mailing Address POST OFFICE BOX 559

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

ENTREPRENEUR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1113.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		08		2014

Transaction ID : SA11AI.11917

Amount of Each Receipt this Period

1113.00

IN-KIND:EVENT CATERING

Full Name (Last, First, Middle Initial)

MARTHA CADE

B.

Mailing Address 11506 NORTHWEST 129TH TERRACE

City

ALACHUA

State

FL

Zip Code

32615

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

VOLUNTEER@NATIONAL HISTORY MUSEU

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10837

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

MARY CADE

C.

Mailing Address 529 NORTHWEST 58TH STREET

City

GAINESVILLE

State

FL

Zip Code

32607

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10838

Amount of Each Receipt this Period

2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5713.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MR. LARRY H CHESHIRE		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 1325 NW 53RD AVE., STE. E		Transaction ID : SA11Al.11493	
City GAINESVILLE	State FL	Zip Code 32609	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer CHESHIRE FAMILY COMPANY	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4730.00		
B. Full Name (Last, First, Middle Initial) MICHAEL A CIRINO		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 1872 COMMODORE PT. DR.		Transaction ID : SA11Al.10874	
City FLEMING ISLAND	State FL	Zip Code 32003	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED	Occupation FINANCIAL ADVISOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) MR. NELSON C. CITTA		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 4989 SE OCTOBER RD.		Transaction ID : SA11Al.11530	
City LAKE CITY	State FL	Zip Code 32025	Amount of Each Receipt this Period 650.00
FEC ID number of contributing federal political committee. C			
Name of Employer G4 SYNERAETICS	Occupation ENGINEER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 650.00		
SUBTOTAL of Receipts This Page (optional).....		1100.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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 (check only one)
☒ 11a 12 ☐ 11b 13a ☐ 11c 13b ☐ 11d 14 ☐ 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) GREG CLARY		Date of Receipt M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 3609 TRAILRIDGE ROAD		Transaction ID : SA11AI.11913
City MIDDLEBURG	State FL	
Zip Code 32068		Amount of Each Receipt this Period 963.00 IN-KIND:EVENT CATERING
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation CLARY ENGINEERING	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1463.00	

Full Name (Last, First, Middle Initial) GREG CLARY		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 3609 TRAILRIDGE ROAD		Transaction ID : SA11AI.10844
City MIDDLEBURG	State FL	
Zip Code 32068		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation CLARY ENGINEERING	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2463.00	

Full Name (Last, First, Middle Initial) TINA CLARY		Date of Receipt M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 3609 TRAIL RIDGE ROAD		Transaction ID : SA11AI.11915
City MIDDLEBURG	State FL	
Zip Code 32068		Amount of Each Receipt this Period 963.00 IN-KIND:EVENT CATERING
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 963.00	

SUBTOTAL of Receipts This Page (optional).....	2926.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 122
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) NATHAN COLLIER			Date of Receipt M M / D D / Y Y Y Y 02 / 27 / 2014	
Mailing Address 820 NORTHWEST 22ND TERRACE			Transaction ID : SA11Al.10901	
City GAINESVILLE	State FL	Zip Code 32605	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C				
Name of Employer COLLIER COMPANY		Occupation PRINCIPAL/CHAIRMAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) NATHAN COLLIER			Date of Receipt M M / D D / Y Y Y Y 02 / 27 / 2014	
Mailing Address 820 NORTHWEST 22ND TERRACE			Transaction ID : SA11Al.10902	
City GAINESVILLE	State FL	Zip Code 32605	Amount of Each Receipt this Period 900.00	
FEC ID number of contributing federal political committee. C				
Name of Employer COLLIER COMPANY		Occupation PRINCIPAL/CHAIRMAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) CONSULTANTS AND ANALYSTS, LLC			Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 7719 NW 18TH LANE			Transaction ID : SA11Al.11818	
City GAINESVILLE	State FL	Zip Code 32605	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer		Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....			3600.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. GILBERT LEVY JR.
Mailing Address 7719 NW 18TH LANE

City State Zip Code
GAINESVILLE FL 32605

FEC ID number of contributing
federal political committee.

C

Name of Employer
CONSULTANTS AND ANALYSTS, LLC

Occupation
PARTNER

Receipt For: 2014
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt

M M / D D / Y Y Y Y
03 28 2014

Transaction ID : SA11AI.11819

Amount of Each Receipt this Period

2600.00

[MEMO ITEM]

PARTNERSHIP CONSULTANTS AND ANALYSTS, LLC

B. Full Name (Last, First, Middle Initial)
ROBERT CORLEY
Mailing Address 3443 TRAIL RIDGE ROAD

City State Zip Code
MIDDLEBURG FL 32068

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt

M M / D D / Y Y Y Y
02 18 2014

Transaction ID : SA11AI.10861

Amount of Each Receipt this Period

400.00

C. Full Name (Last, First, Middle Initial)
DAVID CROMER
Mailing Address 10843 PHILIPS HIGHWAY

City State Zip Code
JACKSONVILLE FL 32256

FEC ID number of contributing
federal political committee.

C

Name of Employer
BAYWOOD ANIMAL HOSPITAL

Occupation
VETERINARIAN

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M / D D / Y Y Y Y
03 16 2014

Transaction ID : SA11AI.11480

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM T CUMMINGS

A.

Mailing Address 932 BIRDWOOD DRIVE

City

ORANGE PARK

State

FL

Zip Code

32073

FEC ID number of contributing
federal political committee.

C

Name of Employer

CUMMINGS CONSULTANT GROUP

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11AI.10884

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DON DAVIS

B.

Mailing Address 3509 NORTHWEST 53RD TERRACE

City

GAINESVILLE

State

FL

Zip Code

32606

FEC ID number of contributing
federal political committee.

C

Name of Employer

CAPITAL CITY BANK

Occupation

BANKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.11814

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

STEFAN DAVIS

C.

Mailing Address 6312 SOUTHWEST 99TH STREET

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer

ADVANCED NUTRITION PARK, LLC

Occupation

MANAGING MEMBER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11AI.11358

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

950.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) JACQUELINE C DAVIS			Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 467 CREIGHTON RD.			Transaction ID : SA11AI.10877	
City	State	Zip Code		
ORANGE PARK	FL	32003		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00	
Name of Employer NONE		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) VIRGINIA DAY			Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2014	
Mailing Address 17404 NORTHWEST CR 239			Transaction ID : SA11AI.11200	
City	State	Zip Code		
ALACHUHA	FL	32615		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00	
Name of Employer NONE		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) ROBERT C DEAL			Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 1392 MENNA ST.			Transaction ID : SA11AI.10857	
City	State	Zip Code		
JACKSONVILLE	FL	32205		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 250.00	
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....			750.00	
TOTAL This Period (last page this line number only).....				

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARILYN DEAS**A.**

Mailing Address 6480 SE 122ND ST.

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
CATTLE RANCHER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.11805

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JULIA M DEBS**B.**

Mailing Address 2412 RED OAK DR.

City

JACKSONVILLE

State

FL

Zip Code

32211

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11AI.10870

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JOHN R DENNY**C.**Mailing Address 5000 SW 25TH BLVD.
APT. 3102

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.11793

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

1000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 122
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) N. TERRY DICKS		Date of Receipt M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address 452 SOUTHWEST CR 240		Transaction ID : SA11Al.10773
City LAKE CITY	State FL	Zip Code 32025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer DICKS TRUCKING	Occupation OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) STEVEN DICKS		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 804 SOUTHEAST FEAGLE AVENUE		Transaction ID : SA11Al.11303
City LAKE CITY	State FL	Zip Code 32025
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 225.00	

Full Name (Last, First, Middle Initial) BRADFORD L. DINKINS		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 801 SOUTHEAST 52ND STREET		Transaction ID : SA11Al.11804
City OCALA	State FL	Zip Code 34480
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BRADFORD DEVELOPMENT	Occupation PRESIDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

THOMAS DODSON**A.**

Mailing Address 75 PONTE VEDRA BLVD.

City

PONTE VEDRA BEACH

State

FL

Zip Code

32082

FEC ID number of contributing
federal political committee.

C

Name of Employer
EASLAND

Occupation

REAL ESTATE DEVELOPER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11AI.10864

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MS. RANDI K ELRAD**B.**

Mailing Address 8015 SW 42ND TEARRACE

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
CRIME PREVENTION SECURITY SYSTEMS

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.11572

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

MR. PETER C ENWALL**C.**

Mailing Address 2626 NW 58TH BLVD.

City

GAINESVILLE

State

FL

Zip Code

32606

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10810

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

750.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

KIAH EUBANKS

A.

Mailing Address POST OFFICE BOX 260

City

O'BRIEN

State

FL

Zip Code

32071

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELFOccupation
FARMER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11Al.11796

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

MRS. JEAN S. FARLEY

B.

Mailing Address PO BOX 937

City

PENNEY FARMS

State

FL

Zip Code

32079

FEC ID number of contributing
federal political committee.

C

Name of Employer
FARLEY FARMSOccupation
OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11Al.11564

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MR. RICHARD L FEAGLE

C.

Mailing Address 13620 SW 89TH AVE.

City

ARCHER

State

FL

Zip Code

32618

FEC ID number of contributing
federal political committee.

C

Name of Employer
ARCHER AUTOMOTIVEOccupation
OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11Al.11558

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

1800.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 21 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

CECILE S FEAGLE**A.**

Mailing Address 13620 SW 89TH AVE.

City

ARCHER

State

FL

Zip Code

32618

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10824

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MR. EARL L. FERENC**B.**

Mailing Address 1101 SW 107TH TERR.

City

GAINESVILLE

State

FL

Zip Code

32606

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11539

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

JEFFREY E FERENC**C.**

Mailing Address 14283 SW 4TH PL.

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.11807

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

1500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) GEORGE G FEUSSNER MD		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014	
Mailing Address PO BOX 47		Transaction ID : SA11AI.11453	
City GAINESVILLE	State FL	Zip Code 32607	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		
B. Full Name (Last, First, Middle Initial) G.W. BLAKE FLETCHER		Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 11514 NW 15TH LN.		Transaction ID : SA11AI.11492	
City GAINESVILLE	State FL	Zip Code 32606	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED	Occupation REAL ESTATE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
C. Full Name (Last, First, Middle Initial) LEWIS GARRISH		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2014	
Mailing Address 2441 NORTHWEST 43RD STREET SUITE 16		Transaction ID : SA11AI.11408	
City GAINESVILLE	State FL	Zip Code 32606	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED	Occupation DDS		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
SUBTOTAL of Receipts This Page (optional).....		1750.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

W. W. GAY

A.

Mailing Address 524 STOCKTON STREET

City

JACKSONVILLE

State

FL

Zip Code

32204

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSTRUCTION

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2014

Transaction ID : SA11Al.10814

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

ELOISE D GAY

B.

Mailing Address 524 STOCKTON ST.

City

JACKSONVILLE

State

FL

Zip Code

32204

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		10		2014

Transaction ID : SA11Al.10813

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

MARC GOLDMAN

C.

Mailing Address PO BOX 8020

City

GARDEN CITY

State

FL

Zip Code

11530

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2014

Transaction ID : SA11Al.11593

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 24 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MR. RODERICK F. GONZALEZ

A.

Mailing Address 24514 NW 78TH AVE.

City

ALACHUA

State

FL

Zip Code

32616

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEALTHCARE RISK MANAGEMENT

Occupation

BUSINESS ADMINISTRATOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10806

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

MR. RODERICK F. GONZALEZ

B.

Mailing Address 24514 NW 78TH AVE.

City

ALACHUA

State

FL

Zip Code

32616

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEALTHCARE RISK MANAGEMENT

Occupation

BUSINESS ADMINISTRATOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.11587

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

EDWIN GONZALEZ

C.

Mailing Address 299 NW CYPRESS COVE DR.

City

LAKE CITY

State

FL

Zip Code

32055

FEC ID number of contributing
federal political committee.

C

Name of Employer

COMM. HEALTH HOSPITALS

Occupation

SURGEON

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.11769

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

750.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 25 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

ASHLEA GRAHAM

Mailing Address PO BOX 14077

City

GAINESVILLE

State

FL

Zip Code

32604

FEC ID number of contributing
federal political committee.

C

Name of Employer

LEVY COUNTY SCHOOL BOARD

Occupation

TEACHER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11Al.11591

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

GRAHAM FARMS, LLC

Mailing Address 13790 NW 30TH AVE.

City

CHIEFLAND

State

FL

Zip Code

32626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11Al.11026

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MARK L GRAHAM

Mailing Address 13790 NW 30TH AVE.

City

CHIEFLAND

State

FL

Zip Code

32626

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11Al.11028

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

PARTNERSHIP GRAHAM FARMS, LLC

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 122

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. PETER C. HALLOCK

Mailing Address **4467 N. SWILCAN BRIDGE LANE**

City **JACKSONVILLE** State **FL** Zip Code **32224**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KING ENGINEERING** Occupation **CIVIL ENGINEER**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		24		2014

Transaction ID : SA11AI.10906

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)
ELLISON HARDEE

Mailing Address **5750 NORTHWEST 135TH STREET**

City **CHIEFLAND** State **FL** Zip Code **32625**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : SA11AI.11209

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
WILL HARDEE

Mailing Address **5650 NORTHWEST 135TH STREET**

City **CHIEFLAND** State **FL** Zip Code **32626**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SOUTHEASTERN CHEMCREAT** Occupation **CONTRACTOR**

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11AI.11256

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 27 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

CURTIS L HART

A.

Mailing Address 8051 TARA LN.

City

JACKSONVILLE

State

FL

Zip Code

32216

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11Al.10850

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

ED HENDERSON

B.

Mailing Address 16318 68TH PLACE

City

LIVE OAK

State

FL

Zip Code

32060

FEC ID number of contributing
federal political committee.

C

Name of Employer

SHENANDOAH DAIRY

Occupation

DAIRY FARMER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
01		24		2014

Transaction ID : SA11Al.10776

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MR. GAYWARD HENDRY

C.

Mailing Address 577 BRANSCOMB RD.

City

GRREN GOVE SPRINGS

State

FL

Zip Code

32043

FEC ID number of contributing
federal political committee.

C

Name of Employer

CLAY COUNTY SHERIFFS OFFICE

Occupation

DEPUTY SHERIFF

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		17		2014

Transaction ID : SA11Al.10783

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 28 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

LARA D HIPPS

A.

Mailing Address 6410 SHINDLER DR.

City

JACKSONVILLE

State

FL

Zip Code

32222

FEC ID number of contributing
federal political committee.

C

Name of Employer
HIPP GROUP, INC.Occupation
CONSULTANT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : SA11AI.11228

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

WILLIAM M HOOD JR.

B.

Mailing Address 14775 OLD SAINT AUGUSTINE RD.

City

JACKSONVILLE

State

FL

Zip Code

32258

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
ENGINEER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11AI.11385

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

JAMES W. HORNE

C.

Mailing Address 2117 LAKESHORE DRIVE NORTH

City

FLEMING ISLAND

State

FL

Zip Code

32003

FEC ID number of contributing
federal political committee.

C

Name of Employer
STRATEGOS PUBLIC AFFIARSOccupation
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11AI.10856

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

1350.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 122
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) CANOVIA HOWARD		Date of Receipt M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 6310 SOUTHWEST CR 18A		Transaction ID : SA11AI.11215
City LAKE BUTLER	State FL	Zip Code 32054
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation BUSINESS OWNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) ROBERT HUDSON		Date of Receipt M M / D D / Y Y Y Y 02 / 26 / 2014
Mailing Address 10876 SW 11TH LN.		Transaction ID : SA11AI.10894
City GAINESVILLE	State FL	Zip Code 32607
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) CAROLYN HUFTY		Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2014
Mailing Address 2725 SOUTHWEST 91ST STREET SUITE 110-83		Transaction ID : SA11AI.11125
City GAINESVILLE	State FL	Zip Code 32608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer SELF	Occupation REAL ESTATE BROKER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MARGARET HUTTON

A.

Mailing Address 2610 HOLLY POINT ROAD WEST

City

ORANGE PARK

State

FL

Zip Code

32073

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 HOMEMAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
 02 18 2014

Transaction ID : SA11AI.10855

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MR. CHRISTOPHER H. JAMES

B.

Mailing Address 1004 SW 113TH WAY

City

GAINESVILLE

State

FL

Zip Code

32607

FEC ID number of contributing
federal political committee.

C

Name of Employer
 PAREGO

Occupation
 EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

650.00

Date of Receipt

M M / D D / Y Y Y Y
 03 24 2014

Transaction ID : SA11AI.11576

Amount of Each Receipt this Period

650.00

Full Name (Last, First, Middle Initial)

DR. EDWIN F. JOHARY P.A.

C.

Mailing Address 1831 NW 13TH ST. STE. 4

City

GAINESVILLE

State

FL

Zip Code

32609

FEC ID number of contributing
federal political committee.

C

Name of Employer
 INFORMATION REQUESTED

Occupation
 INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 02 28 2014

Transaction ID : SA11AI.11051

Amount of Each Receipt this Period

500.00

REFUND PENDING

SUBTOTAL of Receipts This Page (optional).....

1400.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 31 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

VIRGINIA JOHNS

A.

Mailing Address POST OFFICE BOX 986

City

ALACHUA

State

FL

Zip Code

32616

FEC ID number of contributing
federal political committee.

C

Name of Employer

HIPP CONSTRUCTION

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : SA11AI.11238

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

DALE KAPLAN-STEIN

B.

Mailing Address 12801 NORTHWEST 56TH AVENUE

City

GAINESVILLE

State

FL

Zip Code

32653

FEC ID number of contributing
federal political committee.

C

Name of Employer

OAKS VETERINARY HOSPITAL

Occupation

VETERINARIAN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11AI.11350

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MR. MARC W. KAZMIERSKI

C.

Mailing Address 2484 SW MAULDIN AVE.

City

LAKE CITY

State

FL

Zip Code

32024

FEC ID number of contributing
federal political committee.

C

Name of Employer

4F HEALTH

Occupation

EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11527

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

1000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 32 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JEFF KEMPTON

A.

Mailing Address 10202 SOUTHWEST 138TH STREET

City

ARCHER

State

FL

Zip Code

32618

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

PLUMBING

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10825

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

SHARON KEMPTON

B.

Mailing Address 10202 SW 138TH ST.

City

ARCHER

State

FL

Zip Code

32618

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

OFFICE MANAGER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		13		2014

Transaction ID : SA11AI.11253

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

JOHN KIRKPATRICK

C.

Mailing Address 5203 NORTHWEST 49TH LANE

City

GAINESVILLE

State

FL

Zip Code

32653

FEC ID number of contributing
federal political committee.

C

Name of Employer

SONNY'S BBQ

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10811

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 33 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DWIGHT KNIGHT

Mailing Address 11483 NE HIGHWAY 351

City

OLD TOWN

State

FL

Zip Code

32680

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		06		2014

Transaction ID : SA11AI.11211

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. BRENDA B LAND

Mailing Address 1801 NE HEWITT LAND RD.

City

MAYO

State

FL

Zip Code

32088

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2014

Transaction ID : SA11AI.11115

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. DENNIS LEE

Mailing Address POST OFFICE BOX 357845

City

GAINESVILLE

State

FL

Zip Code

32635

FEC ID number of contributing federal political committee.

C

Name of Employer

FLORIDA WOODLAND

Occupation

OWNER/DEVELOPER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.11873

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

1750.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 34 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DENNIS LEE

A.

Mailing Address POST OFFICE BOX 357845

City

GAINESVILLE

State

FL

Zip Code

32635

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLORIDA WOODLANDOccupation
OWNER/DEVELOPER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11Al.11875

Amount of Each Receipt this Period

900.00

Full Name (Last, First, Middle Initial)

CARIDAD LEE

B.

Mailing Address POST OFFICE BOX 357845

City

GAINESVILLE

State

FL

Zip Code

32635

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLORIDA WOODLANDOccupation
OWNER/DEVELOPER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Transaction ID : SA11Al.11874

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

DANIELLE LEHMAN

C.

Mailing Address 8217 SOUTHWEST 95TH LANE

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11Al.11295

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

PAGE 35 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

KENNY LEIGH

A.

Mailing Address 1303 OAKLANDING LN.

City

FLEMING ISLAND

State

FL

Zip Code

32003

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11AI.10858

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

TERRY L LEPRINO

B.

Mailing Address 2000 LITTLE RAVEN ST.

UNIT 6A

City

DENVER

State

CO

Zip Code

80202

FEC ID number of contributing federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		28		2014

Transaction ID : SA11AI.11813

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

JOHN B LINGE JR.

C.

Mailing Address 2085 SALT MYRTLE LANE

City

FLEMING ISLAND

State

FL

Zip Code

32003

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

WEALTH MANAGEMENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11AI.10872

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2800.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 36 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JAMES W LLOYD

A.

Mailing Address 4302 DOBIE RD.

City

OKEMOS

State

MI

Zip Code

48864

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11486

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

BILLY MALPHURS

B.

Mailing Address POST OFFICE BOX 875

City

ALACHUA

State

FL

Zip Code

32616

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF

Occupation

SADDLE MAKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		06		2014

Transaction ID : SA11AI.11181

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MR. JOHN W. MARTIN

C.

Mailing Address 3038 NE WALDO RD.

City

GAINESVILLE

State

FL

Zip Code

32609

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSTRUCTION

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10826

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 37 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DR. MILTON J. MCKELVIE

A.

Mailing Address 920 COUNTRY CLUB BLVD.

City

CAPE CORAL

State

FL

Zip Code

33990

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

VETERINARIAN

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11509

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

RIDGE VETERINARY MEDICAL SOCIETY, INC.

Mailing Address 3691 LAKE ALFRED RD.

City

WINTER HAVEN

State

FL

Zip Code

33881

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11AI.11369

Amount of Each Receipt this Period

500.00

REFUND PENDING

C.

Full Name (Last, First, Middle Initial)

MR. JEFFREY MELDON

Mailing Address PO BOX 65

City

GAINESVILLE

State

FL

Zip Code

32602

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.11052

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

1250.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 38 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MR. WINFORD T. MORRIS

Mailing Address 204 PMB 155

City

MIDDLEBURG

State

FL

Zip Code

32068

FEC ID number of contributing
federal political committee.

C

Name of Employer

CLAY COUNTY

Occupation

UTILITY AUTHORITY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2014

Transaction ID : SA11AI.10907

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MS. PATRICIA MOSER

Mailing Address PO BOX 520

City

ALACHUA

State

FL

Zip Code

32616

FEC ID number of contributing
federal political committee.

C

Name of Employer

HORIZON REALTY

Occupation

REAL ESTATE BROKER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2014

Transaction ID : SA11AI.10912

Amount of Each Receipt this Period

500.00

EARMARKED CONTRIBUTION THROUGH C00484535
VOTESANE PAC

Full Name (Last, First, Middle Initial)

VOTESANE PAC

Mailing Address PO BOX 2713

City

ALEXANDRIA

State

VA

Zip Code

22301

FEC ID number of contributing
federal political committee.

C

C00484535

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02		24		2014

Transaction ID : SA11AI.11921

Amount of Each Receipt this Period

500.00

[MEMO ITEM]
EARMARKED(NON-DIRECTED): CONDUIT LIMIT
NOT AFFECTED

SUBTOTAL of Receipts This Page (optional).....

750.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DANIEL MURPHY

A.

Mailing Address 9911 SHADY COVE DR.

City

FAIRFAX STATION

State

VA

Zip Code

22039

FEC ID number of contributing
federal political committee.

C

Name of Employer

BGR GROUP

Occupation

GENERAL COUNSEL

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11AI.11255

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MRS. PENNIE M. NETTLES

B.

Mailing Address 1323 SE MYRTIS RD

City

LAKE CITY

State

FL

Zip Code

32025

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11AI.11871

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ED NEWMANS

C.

Mailing Address PO BOX 5425

City

GAINESVILLE

State

FL

Zip Code

32627

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
02 / 10 / 2014

Transaction ID : SA11AI.10827

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 40 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MRS. LAURIE K. NEWSOM**A.**

Mailing Address 2521 NW 41ST ST.

City

GAINESVILLE

State

FL

Zip Code

32606

FEC ID number of contributing
federal political committee.

C

Name of Employer
EYE SURGICENTEROccupation
ADMINISTRATOR

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11494

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ED NORFLEET**B.**

Mailing Address 2808 NORTHWEST SR 45

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORFLEET CATTLE COMPANYOccupation
OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2251.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		18		2014

Transaction ID : SA11AI.11911

Amount of Each Receipt this Period

2251.44

IN-KIND:EVENT CATERING

Full Name (Last, First, Middle Initial)

SUZANNE M NORRIS**C.**

Mailing Address 1174 NW SCENIC LAKE DR.

City

LAKE CITY

State

FL

Zip Code

32055

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		07		2014

Transaction ID : SA11AI.11363

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

3001.44

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 41 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

NORTH CENTRAL FLORIDA REMOVAL SERVICE, LLC

Mailing Address 207 SW LORY GLN.

City

LAKE CITY

State

FL

Zip Code

32024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		24		2014

Transaction ID : SA11AI.11574

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MS. LORETTA W. CHANCY

Mailing Address 207 SW LORY GLN

City

LAKE CITY

State

FL

Zip Code

32024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

NORTH CENTRAL FLORIDA REMOVAL SERV

PARTNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		24		2014

Transaction ID : SA11AI.11575

Amount of Each Receipt this Period

250.00

[MEMO ITEM]

PARTNERSHIP NORTH CENTRAL FLORIDA
REMOVAL SERVICE, LLC

Full Name (Last, First, Middle Initial)

JANET PAPPAS

Mailing Address 12530 SOUTHWEST 14TH AVENUE

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

SELF

ORTHODONTIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		05		2014

Transaction ID : SA11AI.11132

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) JOHN PASTORE JR.			Date of Receipt M M / D D / Y Y Y Y 03 / 21 / 2014	
Mailing Address 8015 SOUTHWEST 42ND TERRACE			Transaction ID : SA11AI.11884	
City	State	Zip Code		
GAINESVILLE	FL	32607		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 500.00	
Name of Employer CRIME PREVENTION SYSTEMS		Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1500.00		
B. Full Name (Last, First, Middle Initial) EARL PEELER			Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 1258 SW SISTERS WELCOME RD.			Transaction ID : SA11AI.11812	
City	State	Zip Code		
LAKE CITY	FL	32025		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 500.00	
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) FITZHUGH POWELL			Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address POST OFFICE DRAWER 41490			Transaction ID : SA11AI.10879	
City	State	Zip Code		
JACKSONVILLE	FL	32203		
FEC ID number of contributing federal political committee.		C	Amount of Each Receipt this Period 100.00	
Name of Employer SELF EMPLOYED		Occupation INSURANCE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 4900.00		
SUBTOTAL of Receipts This Page (optional).....			1100.00	
TOTAL This Period (last page this line number only).....				

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) FITZHUGH POWELL		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address POST OFFICE DRAWER 41490		Transaction ID : SA11AI.10881
City JACKSONVILLE	State FL	
Zip Code 32203		Amount of Each Receipt this Period 2300.00
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation INSURANCE	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4900.00	

Full Name (Last, First, Middle Initial) RODGER D POWELL		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 10715 SOUTHWEST 67TH STREET		Transaction ID : SA11AI.11811
City GAINESVILLE	State FL	
Zip Code 32608		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation PHYSICIAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3100.00	

Full Name (Last, First, Middle Initial) MARGARET POWELL		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 2965 FOREST CIRCLE		Transaction ID : SA11AI.10880
City JACKSONVILLE	State FL	
Zip Code 32257		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00	

SUBTOTAL of Receipts This Page (optional).....	2900.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MARGARET POWELL		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 2965 FOREST CIRCLE		Transaction ID : SA11AI.10882	
City JACKSONVILLE	State FL	Zip Code 32257	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5100.00		
B. Full Name (Last, First, Middle Initial) MR. TODD W. POWELL		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 9527 SW 34TH LANE		Transaction ID : SA11AI.11582	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED	Occupation REAL ESTATE		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
C. Full Name (Last, First, Middle Initial) MR. PHILLIP W. PRITCHETT		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address PO BOX 311		Transaction ID : SA11AI.11824	
City LAKE BUTLER	State FL	Zip Code 32054	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer PRITCHETT TRUCKING	Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		
SUBTOTAL of Receipts This Page (optional).....		3750.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

B&G PRODUCE

A.

Mailing Address 17450 NE STATE RD. 121

City
WILLISTON

State
FL

Zip Code
32696

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.11010

Amount of Each Receipt this Period

500.00

REFUND PENDING

Full Name (Last, First, Middle Initial)

MR. DON QUINCEY

B.

Mailing Address 2350 NW 10TH AVE.

City
CHIEFLAND

State
FL

Zip Code
32626

FEC ID number of contributing
federal political committee.

C

Name of Employer
QUINCEY CATTLE

Occupation
OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		24		2014

Transaction ID : SA11AI.11588

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

ALBERT RAWSON

C.

Mailing Address 808-A NORTHWEST 16TH AVENUE

City
GAINESVILLE

State
FL

Zip Code
32601

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
CPA

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		05		2014

Transaction ID : SA11AI.11126

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1800.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) RANDAL L RINGHAVER		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 500 WORLD COMMERCE PKWY.		Transaction ID : SA11Al.10845
City ST. AUGUSTINE	State FL	Zip Code 32092
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) DAVID K ROBERTSON		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014
Mailing Address 2810 COUNTRY CLUB BLVD.		Transaction ID : SA11Al.10876
City ORANJE PARK	State FL	Zip Code 32073
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer SELF EMPLOYED	Occupation ARCHITECT/ENGINEER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00	

Full Name (Last, First, Middle Initial) RICHARD A ROSSI		Date of Receipt M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 814 SW BALI LN.		Transaction ID : SA11Al.11446
City LAKE CITY	State FL	Zip Code 32025
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	2300.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

RPM AUTO, LLC

Mailing Address 24850 NW 9TH PL.

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.11498

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

MR. MORGAN SMITH

Mailing Address 24850 NW 9TH PL.

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing
federal political committee.

C

Name of Employer

RPM AUTO, LLC

Occupation

PARTNER

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.11499

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

PARTNERSHIP RPM AUTO, LLC

Full Name (Last, First, Middle Initial)

MR. WINSTON RUSHING

Mailing Address PO BOX 1252

City

ALACHUA

State

FL

Zip Code

32616

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M / D D / Y Y Y Y
03 / 21 / 2014

Transaction ID : SA11AI.11537

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

600.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MR. DEMPSEY R. SAPP JR.

Mailing Address 18796 SW 132ND AVE.

City

LAKE BUTLER

State

FL

Zip Code

32054

FEC ID number of contributing
federal political committee.

C

Name of Employer
FLORIDA PEST CONTROLOccupation
EXECUTIVE

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.11029

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MR. DEMPSEY R SAPP

Mailing Address 17445 SW 132ND AVE.

City

LAKE BUTLER

State

FL

Zip Code

32054

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11AI.11032

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

GREGORY SELF

Mailing Address 2025 NORTHWEST 24TH STREET

City

GAINESVILLE

State

FL

Zip Code

32605

FEC ID number of contributing
federal political committee.

C

Name of Employer
TERRA-COMOccupation
GEOLOGIST

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.11594

Amount of Each Receipt this Period

1600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) GREGORY SELF		Date of Receipt M M / D D / Y Y Y Y 03 / 27 / 2014	
Mailing Address 2025 NORTHWEST 24TH STREET		Transaction ID : SA11AI.11595	
City GAINESVILLE	State FL	Zip Code 32605	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C			
Name of Employer TERRA-COM	Occupation GEOLOGIST		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		
B. Full Name (Last, First, Middle Initial) MRS. MARILYN SHAW		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 16504 NW 32ND AVE.		Transaction ID : SA11AI.11816	
City NEWBERRY	State FL	Zip Code 32669	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 230.00		
C. Full Name (Last, First, Middle Initial) ROBERT SHIRCLIFF		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 2358 RIVERSIDE AVENUE #1202		Transaction ID : SA11AI.10860	
City JACKSONVILLE	State FL	Zip Code 32204	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....		1430.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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FOR LINE NUMBER: PAGE 50 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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 NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial) DR. STEPHEN A. SHORES		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014
Mailing Address 9503 NE COUNTY RD 1469		Transaction ID : SA11AI.10809
City EALETON	State FL	Zip Code 32631
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer SHORES ANIMAL HOSPITAL	Occupation VETERINARIAN	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. JEFFREY A. SIEGMEISTER		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014
Mailing Address 228 SW INWOOD CT.		Transaction ID : SA11AI.11573
City LAKE CITY	State FL	Zip Code 32024
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer STATE OF FLORIDA	Occupation STATE ATTORNEY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) CHARLES B SKINNER		Date of Receipt M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 6210 SAN JOSE BLVD. W		Transaction ID : SA11AI.10849
City JACKSONVILLE	State FL	Zip Code 32217
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

STEPHANIE M SMITH

A.

Mailing Address 4839 SW COUNTY RD. 344

City

TRENTON

State

FL

Zip Code

32693

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11491

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

RON ST. JOHN

B.

Mailing Address PO BOX 1197

City

TRENTON

State

FL

Zip Code

32693

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALLIANCE DAIRIES

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11885

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

ROBERT H STALLINGS

C.

Mailing Address PO BOX 6100

City

LAKELAND

State

FL

Zip Code

33807

FEC ID number of contributing
federal political committee.

C

Name of Employer

STALLINGS CROP INSURANCE

Occupation

INSURANCE SALES

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2014

Transaction ID : SA11AI.11432

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

2500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) ROBBIE L STEVENS		Date of Receipt M M / D D / Y Y Y Y 02 / 10 / 2014	
Mailing Address 11115 NW 14TH AVE.		Transaction ID : SA11AI.10801	
City GAINESVILLE	State FL	Zip Code 32605	Amount of Each Receipt this Period _____ 750.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		
B. Full Name (Last, First, Middle Initial) ALTO STRAUGHN		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 11322 SOUTHWEST 122ND STREET		Transaction ID : SA11AI.11810	
City GAINESVILLE	State FL	Zip Code 32608	Amount of Each Receipt this Period _____ 2000.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		
C. Full Name (Last, First, Middle Initial) JACKSON STREETER		Date of Receipt M M / D D / Y Y Y Y 03 / 10 / 2014	
Mailing Address 13424 SOUTHWEST 4TH LANE		Transaction ID : SA11AI.11248	
City NEWBERRY	State FL	Zip Code 32669	Amount of Each Receipt this Period _____ 30.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer BANYAN BIOMARKERS	Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4930.00		
SUBTOTAL of Receipts This Page (optional).....		_____ 2780.00	
TOTAL This Period (last page this line number only).....		_____	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MRS. LINDA TATUM

A.

Mailing Address PO DRAWER A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing
federal political committee.

C

Name of Employer
TATUM BRO. LUMBEROccupation
OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11566

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

SYLVIA TATUM

B.

Mailing Address 22512 CR 200A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing
federal political committee.

C

Name of Employer
TATUM BROS LUMBER COMPANYOccupation
SECRETARY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		10		2014

Transaction ID : SA11AI.11246

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

SYLVIA TATUM

C.

Mailing Address 22512 CR 200A

City

LAWTEY

State

FL

Zip Code

32058

FEC ID number of contributing
federal political committee.

C

Name of Employer
TATUM BROS LUMBER COMPANYOccupation
SECRETARY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1060.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		15		2014

Transaction ID : SA11AI.11260

Amount of Each Receipt this Period

60.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1560.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MR. MARK TAYLOR

A.

Mailing Address 1777 LANDWARD LANE

City

MIDDLEBURG

State

FL

Zip Code

32068

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAVITA

Occupation

VICE PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11AI.11821

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

TDG HOLDINGS, LLC

B.

Mailing Address 4458 US HIGHWAY 441

City

LAKE CITY

State

FL

Zip Code

32025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11552

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

MR. TERRY DICKS

C.

Mailing Address 4458 S. US HIGHWAY 441

City

LAKE CITY

State

FL

Zip Code

32025

FEC ID number of contributing
federal political committee.

C

Name of Employer

TDG HOLDINGS, LLC

Occupation

PARTNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1175.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11553

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

PARTNERSHIP TDG HOLDINGS, LLC

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 55 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

JASON M THOMAS

A.

Mailing Address 4032 OLD MILL COVE TRAIL W

City

JACKSONVILLE

State

FL

Zip Code

32277

FEC ID number of contributing
federal political committee.

C

Name of Employer

INDUSTRIAL CLEANING TECH INC

Occupation

VICE PRESIDENT/PROJECT MANAGER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11AI.10859

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

MRS. LORENE J. THOMAS

B.

Mailing Address PO BOX 1475

City

OLD TOWN

State

FL

Zip Code

32680

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11546

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

MR. RONALD THORNTON

C.

Mailing Address 17829 NW 20TH AVE.

City

NEWBERRY

State

FL

Zip Code

32669

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

TECHNOLOGY CONSULTANT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		10		2014

Transaction ID : SA11AI.10798

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) MR. RONALD THORNTON		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address 17829 NW 20TH AVE.		Transaction ID : SA11AI.11580	
City NEWBERRY	State FL	Zip Code 32669	Amount of Each Receipt this Period 140.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED	Occupation TECHNOLOGY CONSULTANT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 890.00		

B. Full Name (Last, First, Middle Initial) MICHAEL A VALLENCOURT		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 598 GLASGOW CT.		Transaction ID : SA11AI.10843	
City ORANGE PARK	State FL	Zip Code 32073	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

C. Full Name (Last, First, Middle Initial) BERT VAN ROYAL		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 3616 MAGNOLIA POINT BLVD.		Transaction ID : SA11AI.10853	
City GREEN COVE SPRINGS	State FL	Zip Code 32043	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer MAGNOLIA POINT REALTY	Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00		

SUBTOTAL of Receipts This Page (optional).....	940.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DIANE WASDIN

A.

Mailing Address 19107 NORTHEAST HWY 301

City

WALDO

State

FL

Zip Code

32694

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		07		2014

Transaction ID : SA11Al.11276

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

TONY WEEKS

B.

Mailing Address 400 FAMILY CIRCLE DR.

City

BRONSON

State

FL

Zip Code

32621

FEC ID number of contributing
federal political committee.

C

Name of Employer

WEEKS BAIL BONDS

Occupation

OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		21		2014

Transaction ID : SA11Al.10785

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

LUTHER M. WHITE JR.

C.

Mailing Address POST OFFICE BOX 1296

City

CHIEFLAND

State

FL

Zip Code

32644

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
03		14		2014

Transaction ID : SA11Al.11451

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 122

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) DANIEL T WHITE		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address PO BOX 357247		Transaction ID : SA11AI.11809	
City GAINESVILLE	State FL	Zip Code 32653	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		
B. Full Name (Last, First, Middle Initial) W J WHITEHURST		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2014	
Mailing Address 5250 NORTHEAST 220TH AVENUE		Transaction ID : SA11AI.11815	
City WILLISTON	State FL	Zip Code 32696	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation WHITEHURST CONSTRUCTION		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		
C. Full Name (Last, First, Middle Initial) DR. RICHARD D. WILKES		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2014	
Mailing Address 2108 OCEANVIEW DR.		Transaction ID : SA11AI.11038	
City TIERRA VERDE	State FL	Zip Code 33715	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer PURCHASING SERVICES	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		
SUBTOTAL of Receipts This Page (optional).....		3850.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

DR. RICHARD D. WILKES

A.

Mailing Address 2108 OCEANVIEW DR.

City

TIERRA VERDE

State

FL

Zip Code

33715

FEC ID number of contributing
federal political committee.

C

Name of Employer

PURCHASING SERVICES

Occupation

PRESIDENT

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5200.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		28		2014

Transaction ID : SA11Al.11042

Amount of Each Receipt this Period

2600.00

Full Name (Last, First, Middle Initial)

GRADY H WILLIAMS JR.

B.

Mailing Address 1576 CHELSEA PL.

City

ORANGE PARK

State

FL

Zip Code

32073

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11Al.10885

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

JAMES RICKY WOOD

C.

Mailing Address 400 RIVER BIRCH LANE

City

FLEMING ISLAND

State

FL

Zip Code

32003

FEC ID number of contributing
federal political committee.

C

Name of Employer

WOOD DEVELOPMENT COMPANY

Occupation

PRESIDENT

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
02		18		2014

Transaction ID : SA11Al.10865

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 60 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

MR. TIM YOHO

Mailing Address W8304 BALD EAGLE DR.

City

TREGO

State

WI

Zip Code

54888

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11521

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

MRS. VIRGINIA L. YOHO

Mailing Address 5679 HIGHLAND TERR.

City

MILFORD

State

OH

Zip Code

45150

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONEOccupation
RETIRED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11AI.11561

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

ROBERT ZELLER

Mailing Address POST OFFICE BOX 14077

City

GAINESVILLE

State

FL

Zip Code

32604

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYEDOccupation
RESTAURANT OWNER

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1820.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2014

Transaction ID : SA11AI.11592

Amount of Each Receipt this Period

450.00

SUBTOTAL of Receipts This Page (optional).....

1200.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 61 OF 122

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

WILLIAM J ZINGARELLI M.D.

Mailing Address 10324 SW 48TH PL.

City

GAINESVILLE

State

FL

Zip Code

32608

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTEDOccupation
INFORMATION REQUESTED

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		06		2014

Transaction ID : SA11Al.11232

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

108750.44

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AIR LINE PILOTS ASSOCIATION PAC

Mailing Address 1625 MASSACHUSETTS AVE. NW

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00035451

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
03 28 2014

Transaction ID : SA11C.11787

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH 3RD STREET

City State Zip Code
MOORHEAD MN 56560

FEC ID number of contributing
federal political committee.

C C00110338

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

10000.00

Date of Receipt

M M / D D / Y Y Y Y
01 16 2014

Transaction ID : SA11C.10791

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN SUGAR CANE LEAGUE OF USA INC POLITICAL ACTION COMMITTEE

Mailing Address P. O. DRAWER 938

City State Zip Code
THIBODAUX LA 70302

FEC ID number of contributing
federal political committee.

C C00081414

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
03 28 2014

Transaction ID : SA11C.11789

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

8000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 208 S. AKARD STREET
 SUITE 2701

City	State	Zip Code
DALLAS	TX	75202

FEC ID number of contributing
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		14		2014

Transaction ID : SA11C.11462

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
 DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOC.

Mailing Address 8400 WESTPARK DRIVE

City	State	Zip Code
MCLEAN	VA	22102

FEC ID number of contributing
federal political committee.

C C00040998

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11C.11533

Amount of Each Receipt this Period

1500.00

C. Full Name (Last, First, Middle Initial)
FLORIDA FARM BUREAU FEDERATION FEDPAC

Mailing Address 5700 SW 34 STREET

City	State	Zip Code
GAINESVILLE	FL	32608

FEC ID number of contributing
federal political committee.

C C00283572

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : SA11C.10770

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

GREAT LAKES SUGARBEET GROWERS POLITICAL ACTION COMMITTEE**A.**

Mailing Address 2600 SOUTH EUCLID AVENUE

City

BAY CITY

State

MI

Zip Code

48706

FEC ID number of contributing
federal political committee.**C** C00384354

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		24		2014

Transaction ID : SA11C.10772

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

HCA INC. GOOD GOVERNMENT FUND**B.**

Mailing Address PO BOX 550

ONE PARK PLAZA

City

NASHVILLE

State

TN

Zip Code

37203

FEC ID number of contributing
federal political committee.**C** C00067231

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		12		2014

Transaction ID : SA11C.11251

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

I-PAC JAX, INC.**C.**

Mailing Address 6944 ST. AUGUSTINE RD.

City

JACKSONVILLE

State

FL

Zip Code

32217

FEC ID number of contributing
federal political committee.**C** C00557926

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		19		2014

Transaction ID : SA11C.10792

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

4000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

INTERNATIONAL ACADEMY OF COMPOUNDING PHARMACISTS PAC (IACP PAC)**A.**

Mailing Address 4638 RIVERSTONE BLVD

City

MISSOURI CITY

State

TX

Zip Code

77459

FEC ID number of contributing
federal political committee.**C**

C00424143

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

3500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
02 18 2014**Transaction ID : SA11C.10842**

Amount of Each Receipt this Period

3500.00

Full Name (Last, First, Middle Initial)

LUMMIS FOR CONGRESS**B.**

Mailing Address PO BOX 52188

City

CASPER

State

WY

Zip Code

82609

FEC ID number of contributing
federal political committee.**C**

C00443580

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
03 31 2014**Transaction ID : SA11C.11872**

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**C.**

Mailing Address 7525 RED RIVER ROAD

City

WAHPETON

State

ND

Zip Code

58075

FEC ID number of contributing
federal political committee.**C**

C00164939

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
01 31 2014**Transaction ID : SA11C.10796**

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

4700.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL CHICKEN COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1015 FIFTEENTH STREET NW

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

C C00034272

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11C.11487

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City	State	Zip Code
CORDOVA	TN	38088

FEC ID number of contributing federal political committee.

C C00023028

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2014

Transaction ID : SA11C.10794

Amount of Each Receipt this Period

500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995

City	State	Zip Code
CORDOVA	TN	38088

FEC ID number of contributing federal political committee.

C C00023028

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2014

Transaction ID : SA11C.10795

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

2000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL TURKEY FEDERATION POLITICAL ACTION COMMITTEE/TURPAC

Mailing Address 1225 NEW YORK AVE NW
 STE 400

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing
federal political committee.

C C00076182

Name of Employer

Occupation

Receipt For: 2014

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2014

Transaction ID : SA11C.11485

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
PASS THE HAT DONATIONS @ CANTERBURY EVENT 3.18.14

Mailing Address 2032 CR 220

City	State	Zip Code
ORANGE PARK	FL	32003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		24		2014

Transaction ID : SA11C.11590

Amount of Each Receipt this Period

2700.00

C. Full Name (Last, First, Middle Initial)
REALTORS POLITICAL ACTION COMMITTEE (RPAC)

Mailing Address 430 N MICHIGAN AVE

City	State	Zip Code
CHICAGO	IL	60611

FEC ID number of contributing
federal political committee.

C C00030718

Name of Employer

Occupation

Receipt For: 2014

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2014

Transaction ID : SA11C.11876

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)
 SEAWORLD PARKS & ENTERTAINMENT INC PAC (SEAWORLD PARKS & ENTERTAINMENT PAC)

A. Mailing Address 9205 SOUTH PARK CENTER LOOP
 SUITE 400

City State Zip Code
 ORLANDO FL 32819

FEC ID number of contributing federal political committee. **C** C00501163

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt

M M / D D / Y Y Y Y
 02 18 2014

Transaction ID : SA11C.10841

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
 SNAKE RIVER SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1951 SOUTH SATURN WAY
 SUITE 100

City State Zip Code
 BOISE ID 83709

FEC ID number of contributing federal political committee. **C** C00326389

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

M M / D D / Y Y Y Y
 02 24 2014

Transaction ID : SA11C.10905

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
 SOUTHEAST MILK, INC. POLITICAL ACTION COMMITTEE

Mailing Address POST OFFICE BOX 3790

City State Zip Code
 BELLEVIEW FL 34421

FEC ID number of contributing federal political committee. **C** C00359984

Name of Employer Occupation

Receipt For: 2014
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt

M M / D D / Y Y Y Y
 03 28 2014

Transaction ID : SA11C.11788

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE PAC**A.**

Mailing Address P O BOX 500

City

RENVILLE

State

MN

Zip Code

56284

FEC ID number of contributing
federal political committee.**C**

C00166348

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
01 31 2014**Transaction ID : SA11C.10797**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

SUNTRUST BANK GOOD GOVERNMENT GROUP FLORIDA**B.**

Mailing Address 215 SOUTH MONROE STREET SUITE 125

City

TALLAHASSEE

State

FL

Zip Code

32301

FEC ID number of contributing
federal political committee.**C**

C00111567

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
01 24 2014**Transaction ID : SA11C.10771**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

THOMAS MASSIE FOR CONGRESS**C.**

Mailing Address PO BOX 1444

City

FLORENCE

State

KY

Zip Code

41022

FEC ID number of contributing
federal political committee.**C**

C00509729

Name of Employer

Occupation

Receipt For: 2014



Primary



General



Other (specify)

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
02 24 2014**Transaction ID : SA11C.10915**

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

5500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
TED YOHO FOR CONGRESS

A. Full Name (Last, First, Middle Initial) WESTERN SUGAR COOPERATIVE PAC		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014	
Mailing Address 7555 EAST HAMPDEN AVENUE SUITE 600		Transaction ID : SA11C.10793	
City DENVER	State CO	Zip Code 80231	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00446674			
Name of Employer Occupation			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00	
B. Full Name (Last, First, Middle Initial) WYOMING HORSE & CATTLE CO.		Date of Receipt M M / D D / Y Y Y Y 02 / 18 / 2014	
Mailing Address 2520 OWL CREEK RD.		Transaction ID : SA11C.10854	
City THERMOPOLIS	State WY	Zip Code 82443	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	
C. Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address			
City	State	Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional).....		1500.00	
TOTAL This Period (last page this line number only).....		38900.00	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address POST OFFICE BOX 360001

City	State	Zip Code
FT. LAUDERDALE	FL	33336

Purpose of Disbursement
SEE MEMO ENTRIES

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

Amount of Each Disbursement this Period

1274.93

Transaction ID : SB17.11641

B. BLUE WATER BAY

Mailing Address 319 SR 26

City	State	Zip Code
MELROSE	FL	32666

Purpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

Amount of Each Disbursement this Period

341.29

Transaction ID : SB17.11643

[MEMO ITEM]

C. BEST BUY

Mailing Address ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
OFFICE EQUIPMENT

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

Amount of Each Disbursement this Period

370.99

Transaction ID : SB17.11644

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

1274.93

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GOTOMYPC.COM

Mailing Address 7414 HOLLISTER AVE

City	State	Zip Code
GOLETA	CA	93117

Purpose of Disbursement
SOFTWARE

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

Amount of Each Disbursement this Period

889.26

Transaction ID : SB17.11645

[MEMO ITEM]

B. US AIRWAYS

Mailing Address 2330 TURNBERRY LANE

City	State	Zip Code
CHARLOTTE	NC	28210

Purpose of Disbursement
AIRFARE

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

Amount of Each Disbursement this Period

346.10

Transaction ID : SB17.11895

[MEMO ITEM]

C. AMERICAN EXPRESS

Mailing Address POST OFFICE BOX 360001

City	State	Zip Code
FT. LAUDERDALE	FL	33336

Purpose of Disbursement
SEE MEMO ENTRIES

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

889.26

Transaction ID : SB17.11686

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

889.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 73 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINESMailing Address POST OFFICE BOX 20980
DEPT. 980

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
AIRFARE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	17	2014

Amount of Each Disbursement this Period

318.00

Transaction ID : SB17.11687

[MEMO ITEM]

B. CAPITOL HILL CLUB

Mailing Address 300 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEMBERSHIP DUES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	17	2014

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17.11688

[MEMO ITEM]

C. STARTLOGIC.COM

Mailing Address ONLINE ONLY

City UNKNOWN State Zip Code

Purpose of Disbursement
WEB HOSTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	17	2014

Amount of Each Disbursement this Period

171.26

Transaction ID : SB17.11689

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address POST OFFICE BOX 360001

City	State	Zip Code
FT. LAUDERDALE	FL	33336

Purpose of Disbursement
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2014

Amount of Each Disbursement this Period

161.44

Transaction ID : SB17.11757

B. WALMART

Mailing Address 3570 SOUTHWEST ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
INSURANCE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		16		2014

Amount of Each Disbursement this Period

105.44

Transaction ID : SB17.11759

[MEMO ITEM]

C. AT&T

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement
TELEPHONE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

72.17

Transaction ID : SB17.11704

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

233.61

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STEPHEN CADE

Mailing Address POST OFFICE BOX 559

City	State	Zip Code
NEWBERRY	FL	32669

Purpose of Disbursement
IN-KIND:EVENT CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		08		2014

Amount of Each Disbursement this Period

1113.00

Transaction ID : SB17.11918

B. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

Amount of Each Disbursement this Period

25.16

Transaction ID : SB17.11647

C. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
SEE MEMO ENTRY

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17.11673

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1358.16

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES POST OFFICE

Mailing Address 4600 SOUTHWEST 34TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
POSTAGE

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		05		2014

Amount of Each Disbursement this Period

220.00

Transaction ID : SB17.11674

[MEMO ITEM]

B. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2014

Amount of Each Disbursement this Period

192.10

Transaction ID : SB17.11685

C. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
REIMBURSE MEETING EXPENSE-NO ITEMIZATION

001

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

Amount of Each Disbursement this Period

14.28

Transaction ID : SB17.11695

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

206.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2014

Amount of Each Disbursement this Period

467.49

Transaction ID : SB17.11755

B. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

139.65

Transaction ID : SB17.11862

C. CANTERBURY EQUESTRIAN CENTER

Mailing Address 23100 WEST NEWBERRY ROAD

City	State	Zip Code
NEWBERRY	FL	32669

Purpose of Disbursement
EVENT FACILITY RENTAL

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

Amount of Each Disbursement this Period

1500.00

Transaction ID : SB17.11835

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2107.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CHASE CARD SERVICES

Mailing Address POST OFFICE BOX 15153

City	State	Zip Code
WILMINGTON	DE	19886

Purpose of Disbursement
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

Amount of Each Disbursement this Period

4	0	4	5	.	0	6
---	---	---	---	---	---	---

Transaction ID : SB17.11626

B. TORTILLA COAST

Mailing Address 400 FIRST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
MEETING EXPENSE

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

Amount of Each Disbursement this Period

3	4	8	.	4	4
---	---	---	---	---	---

Transaction ID : SB17.11627

[MEMO ITEM]

C. FACEBOOK

Mailing Address 156 UNIVERSITY AVE

City	State	Zip Code
PALO ALTO	CA	94301

Purpose of Disbursement
ADVERTISING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		0	1		2	0	1	4

Amount of Each Disbursement this Period

6	5	.	1	2
---	---	---	---	---

Transaction ID : SB17.11628

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4045.06

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 79 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES POST OFFICE

Mailing Address 4600 SOUTHWEST 34TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
POSTAGE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

477.35

Transaction ID : SB17.11631

[MEMO ITEM]

B. MAILCHIMP.COMMailing Address 512 MEANS STREET
SUITE 404

City	State	Zip Code
ATLANTA	GA	30318

Purpose of Disbursement
E-MARKETING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.11633

[MEMO ITEM]

C. BEST BUY

Mailing Address ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
OFFICE EQUIPMENT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

476.98

Transaction ID : SB17.11636

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UPS STORE

Mailing Address 5745 SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
PRINTING

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

683.70

Transaction ID : SB17.11891

[MEMO ITEM]

B. OFFICE DEPOT

Mailing Address 6861 WEST NEWBERRY ROAD

City	State	Zip Code
GAINESVILLE	FL	32605

Purpose of Disbursement
OFFICE SUPPLIES

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

466.37

Transaction ID : SB17.11892

[MEMO ITEM]

C. US HOUSE OF REPRESENTATIVES GIFT SHOP

Mailing Address LONGWORTH BUILDING

City	State	Zip Code
WASHINGTON	DC	20515

Purpose of Disbursement
GIFTS/OFFICE SUPPLIES

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

935.24

Transaction ID : SB17.11893

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CHASE CARD SERVICES

Mailing Address POST OFFICE BOX 15153

City	State	Zip Code
WILMINGTON	DE	19886

Purpose of Disbursement
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

385.88

Transaction ID : SB17.11662

B. FACEBOOK

Mailing Address 156 UNIVERSITY AVE

City	State	Zip Code
PALO ALTO	CA	94301

Purpose of Disbursement
ADVERTISING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

55.87

Transaction ID : SB17.11665

[MEMO ITEM]

C. MAILCHIMP.COMMailing Address 512 MEANS STREET
SUITE 404

City	State	Zip Code
ATLANTA	GA	30318

Purpose of Disbursement
E-MARKETING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.11666

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

385.88

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CHASE CARD SERVICES

Mailing Address POST OFFICE BOX 15153

City	State	Zip Code
WILMINGTON	DE	19886

Purpose of Disbursement
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

4174.48

Transaction ID : SB17.11721

B. OFFICE DEPOT

Mailing Address 6861 WEST NEWBERRY ROAD

City	State	Zip Code
GAINESVILLE	FL	32605

Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

62.29

Transaction ID : SB17.11722

[MEMO ITEM]

C. FACEBOOK

Mailing Address 156 UNIVERSITY AVE

City	State	Zip Code
PALO ALTO	CA	94301

Purpose of Disbursement
ADVERTISING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

178.55

Transaction ID : SB17.11723

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4174.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 83 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES POST OFFICE

Mailing Address 4600 SOUTHWEST 34TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
POSTAGE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

85.65

Transaction ID : SB17.11724

[MEMO ITEM]**B. BEST BUY**

Mailing Address ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
OFFICE EQUIPMENT

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

370.99

Transaction ID : SB17.11725

[MEMO ITEM]**C. TORTILLA COAST**

Mailing Address 400 FIRST ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
MEETING EXPENSE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

320.21

Transaction ID : SB17.11726

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. GODADDY.COM

Mailing Address 375 COLLINS ROAD NORTHEAST

City	State	Zip Code
CEDAR RAPIDS	IA	52402

Purpose of Disbursement
WEB HOSTING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

99.14

Transaction ID : SB17.11727

[MEMO ITEM]**B. PUBLIX SUPERMARKETS, INC.**

Mailing Address 5801 SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
EVENT CATERING

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

399.66

Transaction ID : SB17.11728

[MEMO ITEM]**C. WALMART**

Mailing Address 3570 SOUTHWEST ARCHER ROAD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
OFFICE SUPPLIES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

558.98

Transaction ID : SB17.11729

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MAILCHIMP.COMMailing Address 512 MEANS STREET
SUITE 404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement
E-MARKETING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	01	2014

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.11733

[MEMO ITEM]

B. CONGRESSIONAL INSTITUTE

Mailing Address 401 WYTHE ST #103

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONGRESSIONAL RETREAT

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	01	2014

Amount of Each Disbursement this Period

890.00

Transaction ID : SB17.11735

[MEMO ITEM]

C. TJM PROMOTIONS

Mailing Address 511 NW 48TH TERR

City OCALA State FL Zip Code 34482

Purpose of Disbursement
PROMOTIONAL ITEM: COIN

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	01	2014

Amount of Each Disbursement this Period

608.44

Transaction ID : SB17.11902

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address PO BOX 36647-1CR

City	State	Zip Code
DALLAS	TX	75235

Purpose of Disbursement
AIRFARE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

258.00

Transaction ID : SB17.11903

[MEMO ITEM]

B. GREG CLARY

Mailing Address 3609 TRAILRIDGE ROAD

City	State	Zip Code
MIDDLEBURG	FL	32068

Purpose of Disbursement
IN-KIND:EVENT CATERINGCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

963.00

Transaction ID : SB17.11914

C. TINA CLARY

Mailing Address 3609 TRAIL RIDGE ROAD

City	State	Zip Code
MIDDLEBURG	FL	32068

Purpose of Disbursement
IN-KIND:EVENT CATERINGCategory/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		13		2014

Amount of Each Disbursement this Period

963.00

Transaction ID : SB17.11916

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1926.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DIRECT MAIL SYSTEMS, INC.

Mailing Address 12450 AUTOMOBILE BLVD

City	State	Zip Code
CLEARWATER	FL	33762

Purpose of Disbursement
DIRECT MARKETING

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

Amount of Each Disbursement this Period

15300.00

Transaction ID : SB17.11675

B. GILCHRIST COUNTY JOURNAL

Mailing Address 207 NORTH MAIN STREET

City	State	Zip Code
TRENTON	FL	32693

Purpose of Disbursement
ADVERTISING

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

352.00

Transaction ID : SB17.11739

C. KB STRATEGIC GROUP

Mailing Address PO BOX 101682

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

996.00

Transaction ID : SB17.11668

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

16648.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KB STRATEGIC GROUP

Mailing Address PO BOX 101682

City	State	Zip Code
ARLINGTON	VA	22201

Purpose of Disbursement
FUNDRAISING CONSULTING

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 24 / 2014

Amount of Each Disbursement this Period

4556.84

Transaction ID : SB17.11853

B. LAKE CITY CHAMBER OF COMMERCE

Mailing Address 162 S MARION AVE

City	State	Zip Code
LAKE CITY	FL	32025

Purpose of Disbursement
EVENT TICKETS

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 25 / 2014

Amount of Each Disbursement this Period

450.00

Transaction ID : SB17.11669

C. MADALINA ANN MOTT

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Category/
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 15 / 2014

Amount of Each Disbursement this Period

19.13

Transaction ID : SB17.11756

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5025.97

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. MADALINA ANN MOTT

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
MILEAGE REIMBURSEMENT

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

73.89

Transaction ID : SB17.11863

B. ED NORFLEET

Mailing Address 2808 NORTHWEST SR 45

City	State	Zip Code
NEWBERRY	FL	32669

Purpose of Disbursement
IN-KIND:EVENT CATERING

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		18		2014

Amount of Each Disbursement this Period

2251.44

Transaction ID : SB17.11912

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City	State	Zip Code
SAN FRANCISCO	CA	94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		17		2014

Amount of Each Disbursement this Period

45.00

Transaction ID : SB17.11597

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2370.33

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 90 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	20	2014

Amount of Each Disbursement this Period

1.13

Transaction ID : SB17.11598

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	21	2014

Amount of Each Disbursement this Period

11.25

Transaction ID : SB17.11599

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
02	22	2014

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.11600

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

14.63

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	23	2014

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.11601

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	24	2014

Amount of Each Disbursement this Period

11.25

Transaction ID : SB17.11602

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	26	2014

Amount of Each Disbursement this Period

34.60

Transaction ID : SB17.11603

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

48.55

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	27	2014

Amount of Each Disbursement this Period

45.00

Transaction ID : SB17.11604

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	28	2014

Amount of Each Disbursement this Period

4.50

Transaction ID : SB17.11605

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	01	2014

Amount of Each Disbursement this Period

1.13

Transaction ID : SB17.11606

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

50.63

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

4.05

Transaction ID : SB17.11607

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

Amount of Each Disbursement this Period

34.67

Transaction ID : SB17.11608

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		08		2014

Amount of Each Disbursement this Period

4.05

Transaction ID : SB17.11609

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

42.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		09		2014

Amount of Each Disbursement this Period

1.35

Transaction ID : SB17.11610

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		10		2014

Amount of Each Disbursement this Period

49.05

Transaction ID : SB17.11611

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		11		2014

Amount of Each Disbursement this Period

2.25

Transaction ID : SB17.11612

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

52.65

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		12		2014

Amount of Each Disbursement this Period

2.70

Transaction ID : SB17.11613

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		13		2014

Amount of Each Disbursement this Period

72.90

Transaction ID : SB17.11614

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2014

Amount of Each Disbursement this Period

29.03

Transaction ID : SB17.11615

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

104.63

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 96 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	15	2014

Amount of Each Disbursement this Period

10.80

Transaction ID : SB17.11616

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	16	2014

Amount of Each Disbursement this Period

5.40

Transaction ID : SB17.11617

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOORCity State Zip Code
SAN FRANCISCO CA 94105Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	17	2014

Amount of Each Disbursement this Period

16.20

Transaction ID : SB17.11618

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

32.40

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	18	2014

Amount of Each Disbursement this Period

6.75

Transaction ID : SB17.11619

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	19	2014

Amount of Each Disbursement this Period

22.50

Transaction ID : SB17.11620

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
03	20	2014

Amount of Each Disbursement this Period

1.58

Transaction ID : SB17.11621

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

30.83

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	27	2014

Amount of Each Disbursement this Period

177.75

Transaction ID : SB17.11622

B. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	28	2014

Amount of Each Disbursement this Period

1.44

Transaction ID : SB17.11623

C. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	29	2014

Amount of Each Disbursement this Period

3.47

Transaction ID : SB17.11624

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

182.66

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 99 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.Mailing Address 144 SECOND STREET
FIRST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
CC TRANSACTION FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		30		2014

Amount of Each Disbursement this Period

5.04

Transaction ID : SB17.11625

B. PROFESSIONAL DATA SERVICES, INC.

Mailing Address 2470 DANIELL'S BRIDGE RD, STE 121

City ATHENS State GA Zip Code 30606

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.11637

C. PROFESSIONAL DATA SERVICES, INC.

Mailing Address 2470 DANIELL'S BRIDGE RD, STE 121

City ATHENS State GA Zip Code 30606

Purpose of Disbursement
COMPLIANCE CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		02		2014

Amount of Each Disbursement this Period

2002.76

Transaction ID : SB17.11671

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4007.80

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. PROFESSIONAL DATA SERVICES, INC.

Mailing Address 2470 DANIELL'S BRIDGE RD, STE 121

City	State	Zip Code
ATHENS	GA	30606

Purpose of Disbursement
COMPLIANCE CONSULTING

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

Amount of Each Disbursement this Period

2000.96

Transaction ID : SB17.11719

B. SQUAREUP.COM

Mailing Address INTERNET ONLY - NO PHYSICAL ADDRESS

City	State	Zip Code
SAN FRANCISCO	CA	94101

Purpose of Disbursement
CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

Amount of Each Disbursement this Period

36.27

Transaction ID : SB17.11904

C. SQUAREUP.COM

Mailing Address INTERNET ONLY - NO PHYSICAL ADDRESS

City	State	Zip Code
SAN FRANCISCO	CA	94101

Purpose of Disbursement
CC TRANSACTION FEES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		14		2014

Amount of Each Disbursement this Period

1.03

Transaction ID : SB17.11905

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2038.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SQUAREUP.COM

Mailing Address INTERNET ONLY - NO PHYSICAL ADDRESS

City	State	Zip Code
SAN FRANCISCO	CA	94101

Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 19 / 2014

Amount of Each Disbursement this Period

69.12

Transaction ID : SB17.11906

B. SQUAREUP.COM

Mailing Address INTERNET ONLY - NO PHYSICAL ADDRESS

City	State	Zip Code
SAN FRANCISCO	CA	94101

Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 21 / 2014

Amount of Each Disbursement this Period

35.15

Transaction ID : SB17.11907

C. SQUAREUP.COM

Mailing Address INTERNET ONLY - NO PHYSICAL ADDRESS

City	State	Zip Code
SAN FRANCISCO	CA	94101

Purpose of Disbursement
CC TRANSACTION FEES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 27 / 2014

Amount of Each Disbursement this Period

17.65

Transaction ID : SB17.11908

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

121.92

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STRATEGIC IMAGE MANAGEMENT, LLC

Mailing Address 511 W BAY ST, STE 350

City	State	Zip Code
TAMPA	FL	33606

Purpose of Disbursement
CAMPAIGN STRATEGY

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB17.11738

B. SUNTRUST BANK

Mailing Address 5303 SOUTHWEST 91ST DRIVE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
BANK FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		21		2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.11691

C. SUNTRUST BANK

Mailing Address 5303 SOUTHWEST 91ST DRIVE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
BANK FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

Amount of Each Disbursement this Period

42.50

Transaction ID : SB17.11692

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2092.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SUNTRUST BANK

Mailing Address 5303 SOUTHWEST 91ST DRIVE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
BANK FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

6.00

Transaction ID : SB17.11869

B. SUNTRUST BANK

Mailing Address 5303 SOUTHWEST 91ST DRIVE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
BANK FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		20		2014

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17.11870

C. SUNTRUST BANK

Mailing Address 5303 SOUTHWEST 91ST DRIVE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
BANK FEES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

245.50

Transaction ID : SB17.11864

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

301.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL(SEE MEMO)

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	25	2014

Amount of Each Disbursement this Period

3069.72

Transaction ID : SB17.11648

B. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL TAXES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	25	2014

Amount of Each Disbursement this Period

279.54

Transaction ID : SB17.11649

[MEMO ITEM]

C. LAURA JACKSON

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City TRENTON State FL Zip Code 32693

Purpose of Disbursement
SALARY

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
01	25	2014

Amount of Each Disbursement this Period

437.50

Transaction ID : SB17.11650

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3069.72

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
SALARY

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

2352.68

Transaction ID : SB17.11651

[MEMO ITEM]**B. SUREPAYROLL, INC.**Mailing Address 2350 RAVINE WAY
SUITE 100

City	State	Zip Code
GLENVIEW	IL	60025

Purpose of Disbursement
PAYROLL(SEE MEMO)

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2014

Amount of Each Disbursement this Period

1869.04

Transaction ID : SB17.11681

C. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

City	State	Zip Code
GLENVIEW	IL	60025

Purpose of Disbursement
PAYROLL TAXES

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2014

Amount of Each Disbursement this Period

184.47

Transaction ID : SB17.11682

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1869.04

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
SALARY

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2014

Amount of Each Disbursement this Period

1247.04

Transaction ID : SB17.11683

[MEMO ITEM]

B. LAURA JACKSON

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City	State	Zip Code
TRENTON	FL	32693

Purpose of Disbursement
SALARY

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		15		2014

Amount of Each Disbursement this Period

437.53

Transaction ID : SB17.11684

[MEMO ITEM]

C. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

City	State	Zip Code
GLENVIEW	IL	60025

Purpose of Disbursement
PAYROLL(SEE MEMO)

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

Amount of Each Disbursement this Period

1200.82

Transaction ID : SB17.11699

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1200.82

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL TAXES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	28	2014

Amount of Each Disbursement this Period

137.19

Transaction ID : SB17.11700

[MEMO ITEM]

B. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City GAINESVILLE State FL Zip Code 32608

Purpose of Disbursement
SALARY

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	28	2014

Amount of Each Disbursement this Period

678.63

Transaction ID : SB17.11701

[MEMO ITEM]

C. LAURA JACKSON

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City TRENTON State FL Zip Code 32693

Purpose of Disbursement
SALARY

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	28	2014

Amount of Each Disbursement this Period

385.00

Transaction ID : SB17.11702

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL(SEE MEMO)

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2014

Amount of Each Disbursement this Period

3020.15

Transaction ID : SB17.11750

B. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL TAXES

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2014

Amount of Each Disbursement this Period

298.08

Transaction ID : SB17.11751

[MEMO ITEM]

C. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City GAINESVILLE State FL Zip Code 32608

Purpose of Disbursement
SALARY

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2014

Amount of Each Disbursement this Period

1247.07

Transaction ID : SB17.11752

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3020.15

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. LAURA JACKSON

Mailing Address 6470 SOUTHEAST 60TH AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2014

City	State	Zip Code
TRENTON	FL	32693

Amount of Each Disbursement this Period

1085.00

Purpose of Disbursement
SALARY

001

Transaction ID : SB17.11753

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. MADALINA ANN MOTT

Mailing Address 2330 SW WILLISTON RD

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		15		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

390.00

Purpose of Disbursement
SALARY

001

Transaction ID : SB17.11754

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

City	State	Zip Code
GLENVIEW	IL	60025

Amount of Each Disbursement this Period

2724.03

Purpose of Disbursement
PAYROLL(SEE MEMO)

001

Transaction ID : SB17.11855

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2724.03

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. KATHRYN CAMMACK

Mailing Address 8209 SOUTHWEST 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
SALARY

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

1057.69

Transaction ID : SB17.11856

[MEMO ITEM]

B. MADALINA ANN MOTT

Mailing Address 2330 SW WILLISTON RD

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
SALARY

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

470.00

Transaction ID : SB17.11858

[MEMO ITEM]

C. LAURA JACKSON

Mailing Address 6470 SOUTHEAST 60TH AVENUE

City	State	Zip Code
TRENTON	FL	32693

Purpose of Disbursement
SALARY

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

927.50

Transaction ID : SB17.11860

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. SUREPAYROLL, INC.Mailing Address 2350 RAVINE WAY
SUITE 100

City GLENVIEW State IL Zip Code 60025

Purpose of Disbursement
PAYROLL TAXES

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	31	2014

Amount of Each Disbursement this Period

268.84

Transaction ID : SB17.11861

[MEMO ITEM]**B. SUWANNEE DEMOCRAT**

Mailing Address 211 HOWARD ST E

City LIVE OAK State FL Zip Code 32064

Purpose of Disbursement
ADVERTISING

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	14	2014

Amount of Each Disbursement this Period

249.85

Transaction ID : SB17.11749

C. THE CONGRESSIONAL CLUB

Mailing Address 2001 NEW HAMPSHIRE AVE NW

City WASHINGTON State DC Zip Code 20009

Purpose of Disbursement
EVENT TICKETS

001

Category/
Type

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	24	2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17.11850

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

499.85

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES POST OFFICE

Mailing Address 4600 SOUTHWEST 34TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		07		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

600.00

Purpose of Disbursement
POSTAGE

001

Transaction ID : SB17.11676

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

B. UNITED STATES POST OFFICE

Mailing Address 4600 SOUTHWEST 34TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		26		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

800.00

Purpose of Disbursement
POSTAGE

001

Transaction ID : SB17.11697

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

Full Name (Last, First, Middle Initial)

C. UNITED STATES POST OFFICE

Mailing Address 4600 SOUTHWEST 34TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		28		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

800.00

Purpose of Disbursement
POSTAGE

001

Transaction ID : SB17.11703

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2200.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 113 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UNITED STATES POST OFFICE

Mailing Address 4600 SOUTHWEST 34TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
POSTAGE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		04		2014

Amount of Each Disbursement this Period

685.00

Transaction ID : SB17.11736

B. UNITED STATES POST OFFICE

Mailing Address 4600 SOUTHWEST 34TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
POSTAGE

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

Amount of Each Disbursement this Period

147.00

Transaction ID : SB17.11741

C. UPS STORE

Mailing Address 5745 SOUTHWEST 75TH STREET

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
MAILBOX RENTAL

001

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

219.42

Transaction ID : SB17.11661

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1051.42

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UPS STORE

Mailing Address 5745 SOUTHWEST 75TH STREET

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		21		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

174.90

Purpose of Disbursement
PRINTING

001

Transaction ID : SB17.11836

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. US AIRWAYS CARD SERVICES

Mailing Address PO BOX 13337

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

City	State	Zip Code
PHILADELPHIA	PA	19101

Amount of Each Disbursement this Period

501.00

Purpose of Disbursement
SEE MEMO ENTRY

001

Transaction ID : SB17.11720

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 2330 TURNBERRY LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		01		2014

City	State	Zip Code
CHARLOTTE	NC	28210

Amount of Each Disbursement this Period

501.00

Purpose of Disbursement
AIRFARE

001

Transaction ID : SB17.11900

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

675.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 115 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. WEBELECT

Mailing Address 1256 VINETREE DRIVE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		27		2014

City	State	Zip Code
BRANDON	FL	33510

Amount of Each Disbursement this Period

810.00

Purpose of Disbursement
VOTER DATA SUBSCRIPTION

001

Transaction ID : SB17.11670

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. THEODORE SCOTT YOHO

Mailing Address 8209 SOUTHWEST 95TH LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		05		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

933.85

Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Transaction ID : SB17.11646

Candidate Name

THEODORE YOHOCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: FL

District: 03

Full Name (Last, First, Middle Initial)

C. THEODORE SCOTT YOHO

Mailing Address 8209 SOUTHWEST 95TH LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		07		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

944.01

Purpose of Disbursement
MILEAGE REIMBURSEMENT

001

Transaction ID : SB17.11740

Candidate Name

THEODORE YOHOCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: FL

District: 03

SUBTOTAL of Disbursements This Page (optional).....

2687.86

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAROLYN YOHO

Mailing Address 8209 SW 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
SEE MEMO ENTRIES

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

410.90

Transaction ID : SB17.11638

B. VERIZON WIRELESS

Mailing Address POST OFFICE BOX 105378

City	State	Zip Code
ATLANTA	GA	30348

Purpose of Disbursement
TELEPHONE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

209.96

Transaction ID : SB17.11639

[MEMO ITEM]

C. AT&T

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement
TELEPHONE

001

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		01		2014

Amount of Each Disbursement this Period

141.31

Transaction ID : SB17.11640

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

410.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 117 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAROLYN YOHO

Mailing Address 8209 SW 95TH LANE

City	State	Zip Code
GAINESVILLE	FL	32608

Purpose of Disbursement
SEE MEMO ENTRIES

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

274.29

Transaction ID : SB17.11658

B. VERIZON WIRELESS

Mailing Address POST OFFICE BOX 105378

City	State	Zip Code
ATLANTA	GA	30348

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

202.43

Transaction ID : SB17.11659

[MEMO ITEM]

C. AT&T

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement
TELEPHONE

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

71.86

Transaction ID : SB17.11660

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

274.29

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAROLYN YOHO

Mailing Address 8209 SW 95TH LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

203.36

Purpose of Disbursement
SEE MEMO ENTRY

001

Transaction ID : SB17.11693

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. VERIZON WIRELESS

Mailing Address POST OFFICE BOX 105378

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		24		2014

City	State	Zip Code
ATLANTA	GA	30348

Amount of Each Disbursement this Period

203.36

Purpose of Disbursement
TELEPHONE

001

Transaction ID : SB17.11694

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. CAROLYN YOHO

Mailing Address 8209 SW 95TH LANE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

City	State	Zip Code
GAINESVILLE	FL	32608

Amount of Each Disbursement this Period

282.71

Purpose of Disbursement
SEE MEMO ENTRIES

001

Transaction ID : SB17.11852

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

486.07

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 122

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address 208 S AKARD ST

City	State	Zip Code
DALLAS	TX	75202

Purpose of Disbursement
TELEPHONE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

72.06

Transaction ID : SB17.11919

[MEMO ITEM]

B. VERIZON WIRELESS

Mailing Address POST OFFICE BOX 105378

City	State	Zip Code
ATLANTA	GA	30348

Purpose of Disbursement
TELEPHONE

001

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

210.65

Transaction ID : SB17.11920

[MEMO ITEM]

C.

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

69936.98

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BRADFORD COUNTY 4-H

Mailing Address 2266 N TEMPLE AVE

City	State	Zip Code
STARKE	FL	32091

Purpose of Disbursement
DONATION

012

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		24		2014

Amount of Each Disbursement this Period

250.00

Transaction ID : SB21.11851

B. COFFMAN FOR CONGRESS

Mailing Address 4950 S YOSEMITE STREET F2 #511

City	State	Zip Code
GREENWOOD VILLAGE	CO	80111

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

MICHAEL COFFMAN

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: CO

District: 06

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.11652

C. COTTON FOR SENATE

Mailing Address PO BOX 379

City	State	Zip Code
DARDANELLE	AR	72834

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Candidate Name

THOMAS COTTON

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: AR

District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.11653

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 122

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAVID JOLLY

Mailing Address P. O. BOX 1158

City	State	Zip Code
INDIAN ROCKS BEACH	FL	33785

Purpose of Disbursement
POLITICAL CONTRIBUTION-SPECIAL GENERAL 2014

011

Category/
Type

Candidate Name

DAVID JOLLY

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify)

State: FL District: 13

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		05		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.11737

B. GLO FOR CONGRESS

Mailing Address 133 SOUTH HARBOR DRIVE

City	State	Zip Code
VENICE	FL	34285

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

GLOREATHA SCURRY-SMITH

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: FL District: 05

Date of Disbursement

M M	/	D D	/	Y Y Y Y
03		31		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.11865

C. JUSTIN AMASH FOR CONGRESS

Mailing Address 1500 E BELTLINE AVE SE STE 250

City	State	Zip Code
GRAND RAPIDS	MI	49506

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

JUSTIN AMASH

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: MI District: 03

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.11655

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 122 OF 122

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

TED YOHO FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. STEVE DAINES FOR MONTANA

Mailing Address PO BOX 1598

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		25		2014

City	State	Zip Code
HELENA	MT	59624

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Transaction ID : SB21.11654

Candidate Name

STEVEN DAINESCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify)

State: MT

District: 00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	/	D D	/	Y Y Y Y

City	State	Zip Code

Amount of Each Disbursement this Period

--

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

6250.00